PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it disclays a valid OMB control uniter.

CLAIMS AS FILED - PART 1 Column 2) SMALL ENTITY OR SMALL ENTITY OR SMALL ENTITY OR OR SMALL ENTITY OR	Under the Paperwork R	IT APPLICATION	no persons are req ON FEE DETE stitute for Form P	ERMINATIO	N	RECORD	omation unle	Applicat	ion of Docket Nu	mber	· .	
SASIC FE Second	. (olumn 2)	•	SMALL E	NTITY	OR				
BASIC FEE (Column 1) (Column 2) (Column 3) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 5) (Column 6) (Column 7) (Column 7) (Column 8) (Column 8) (Column 1) (Column 8) (Column 1) (Column 8) (Column 1) (Column 8) (Column 1) (Column 1) (Column 1) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 3) (Column 1) (Column 3) (Column 5) (Column 1) (Column 6) (Column 1) (Column 7) (Column 8) (Column 1) (Column 8) (Column 1) (Column 1) (Column 1) (Column 8) (Column 1) (Column 2) (Column 3) (Column 3) (Column 1) (Column 3) (Column 3) (Column 3) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 5) (Column 6) (Column 1) (Column 1) (Column 1) (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 5) (Column 6) (Column 6) (Column 7) (Column 7) (Column 8) (Column 1) (Column 1) (Column 1) (Column 1) (Column 1) (Column 3) (Column 1) (Column 2) (Column 3) (Column 3) (Column 4) (Column 5) (Column 6) (Column 6) (Column 6) (Column 7) (Column 7) (Column 8) (Column 8) (Column 1) (Column 8) (Column 1) (C		NUMBER FILE	D NUME	BER EXTRA		RATE	FEE		RATE	FEE		
TOTAL CLAMS (37 CFR 1.16(d)) (4			-		┝		s	OR		s	1	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		minus	20		1	x s =			Y \$ =		1	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) "If the difference in codumn 1 is less then zero, enter "0" in cotumn 2. CLAIMS AS AMENDED - PART II (Column 2) (Column 3) TOTAL OR OR TOTAL OR OTHER THAN SMALL ENTITY OR OR OR X \$ _ =	INDEPENDENT CLAIMS										1	
H the difference in column 1 is less than zero, enter '0' in column 2. **CLAIMS AS AMENDED - PART II **O-31-0 (Column 1)					1			OR	X3=	-		
Column 1)	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+\$=		OR	+ 5=			
Column 1)	* If the difference in column 1 is less than zero, enter *0" in column 2.					TOTAL		OR	TOTAL		123	1
Column 1)	CLAI	MS AS AMENDE	D - PART II	•						•	.20	.0
REMAINING	10-31-06			(Column 3)		SMALL E	ENTITY	OR			/00	
Column 1 Column 2 Column 3		REMAINING AFTER	NUMBER PREVIOUSLY			RATE	TIONAL		RATE	TIONAL		
Column 1 Column 2 Column 3	Total (37 CFR 1,16(e))	106 Minu	5 70/	-5		x \$ =		OB.	× 50 m	0	b	
Column 1 Column 2 Column 3	Z Inděpendent *	Minu		10						12.	1	
Column 1)	A EMET BOSSENTATION	ON OF MAIN YOUR DESC	100	TD 4 45(41)							1	
Column 1 Column 2 Column 3	PROF PRESENTATION	ON OF MULTIPLE DEPE	NDENT CLICIA (37 C	FR 1.18(0))						200	20	
CLAIMS REMAINING REMAINING REVIOUSLY PRESENT PREVIOUSLY PAID FOR EXTRA						ADD'L FEE		OR	ADD'L FEE	€X).		
REMAINING AFTER AFTER PREVIOUSLY PAID FOR PRESENT FOR 1.18(c)				(Column 3)				ŀ			ļ	,
Column 1)		REMAINING AFTER	NUMBER PREVIOUSLY			RATE	TIONAL		RATE	TIONAL		
Column 1)	Total (37 CFR 1.15(c))	10 6 Minu	106	= /		x s =		OR	X \$ =			
Column 1)	Z Independent (37 CFR 1.15(b))	Minu		•					· ·		r	
(Column 1) (Column 2) (Column 3) CLAIMS REMAINING AFTER PREVIOUSLY PREVIOUSLY PREVIOUSLY PREVIOUSLY PREVIOUSLY PAID FOR TIONAL FEE TOTAL ADD'L FEE OR ADD'L FEE RATE ADDITIONAL FEE TOTAL ADD'L FEE OR X \$ =	S SIDET POECENTARY	ON OF MILITIDIE DEDE	MOENT CLAIM /27.0	20.10(1)						/	1	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PRESENT EXTRA AFTER ADDITIONAL FEE Total 17 CFR 1.16(c) Minus " =	TIKOT PRESENTAN	ON OF MOCHFEE BEFE	MDENT COOM (37 C	FR 1,10(0))				ØR				
CLAIMS REMAINING AFTER AFTER AMENDMENT Total Tot				,		ADD'L FEE		OR	ADO'L FEE	<u>/</u>		
REMAINING NUMBER PRESENT EXTRA RATE ADDITIONAL FEE				(Column 3)				i				
Total Minus		REMAINING AFTER	NUMBER PREVIOUSLY		ŀ	RATE	TIONAL		RATE	TIONAL		
Z Independent (27 CFR \ 16(b)) X \$ = OR X \$ = OR X \$ =	Total *			2		x s =		00	x . =		1	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (27 CED 1 16/4))	Z Independent *	Minu	s	-								
	A FIGST DDSSEARCH	ON OF MILE OF SE	NDENT CLARL 123 C	ED 4 46/6"						·		
TOTAL TOTAL	- FINOI PRESENTATIO	ON OF MULTIPLE DEPE	HUENT COAM (37 C	FK 1.10(0))				OR			1	
ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.	B MAN	4 to Jaco 11 - 1 11 - 1			_			OR		L	1	

"" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"
"" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.